

**COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES
FOR CHILDREN AND THEIR FAMILIES PROGRAM**

Child, Adolescent and Family Branch
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services

QUARTERLY REPORT

Project Name: Children's Mental Health Initiative
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Date: March 31, 2003
Quarterly Report Period: December 2002 through February 2003

I. Goals of the Project:

- *Have there been any changes in the goals of the project this quarter and for what reasons?* None

If there are no changes, describe progress toward achievement of the goals as described in your application.

1.) Outcome-driven service delivery, supported by rigorous evaluation.

Progress continues in the implementation of contracted services which are held to the system of care values, principles with redesigned services. Monitoring of efforts continues to be carried out by Behavioral Health case managers and monthly reports of services are provided to citizen boards.

PSU continues to carry out the evaluation study. Information is shared regularly with Community of Care Committees and is posted on their website, www.rtc.pdx.edu which is linked to the CSOC website.

2.) System Wide Management Information System

Phased-implementation of new software with expanded reporting capability continues.

3.) Enhanced involvement of consumers at all levels of the system of care

Plans are underway for a Speak Out in March 2003. Consumers receiving service will be invited to speak about services being received, and whether or not they are meeting their needs.

Community Partners Committee continues to present information about avenues to connect with services. Families are using the Community Partners process for problem solving with service providers and agencies.

4.) Development of a Children's Trust Fund

The Resource Management Committee continues to monitor flex funds. Recommendations regarding options for sustaining the flex fund will be forwarded to the Community of Care Advisory Council in June 2003.

5.) Expanded system of case finding, screening and assessment

Ongoing screenings and assessments continue through the projects and contracted services being accessed by children and families. Outreach efforts by the Community Partners and Parent Partners continues.

6.) Cross system program for increased cultural competence.

Clinical Practice Standards for Cultural Competency are in place. A process for monitoring the standards during chart views is ready to be implemented.

7.) Enhanced capacity for resource mapping and asset identification

Connections with Family Resource Centers, the Youth House, and Community Initiatives for Youth Suicide Prevention and HopeWorks (40 Developmental Assets as identified by the Search Institute) continue. A presentation on the progress of the Youth Suicide Strategy Teams was made at the January System of Care Community Meeting in Portland, Oregon. A summary of the surveys from this presentation has not been received, but presenters perused them and found that the majority of feedback indicated that the session was informative, and that the discussions involving the audience around real life situations made the presentation very relevant.

Appendices 1. Handout for Youth Suicide Prevention Presentation, SOC Community Meeting, Portland, Oregon.

II. Target Population of Children who have Serious Emotional Disturbances:

- *Number of children newly enrolled in services this quarter only:*
New intakes 36
Female 20
Male 16
- *Number of children served to date: 483*
- *How does your enrollment effort reflect the ethnic/racial diversity of the entire geographic area defined in your application?*
White 28 American Indian 1
Black 3 Other 4
- *Across all systems partners; how many children, as of this reporting period, are currently being served:*
Out of State: Zero
Out of Community: 26

III. Child and Family Services/Supports:

- *Which of the mandated services (as identified in the Guidance for Applicants) has been implemented?*
All mandated services continue to be provided. Regular meetings take place to assess and refine services.

The Resource Management Committee (RMC) developed a plan in December 2002 for reviewing projects and programs funded by the grant. In January, the following programs were reviewed: Crisis Stabilization (Catholic Community Services), Columbia River Mental Health Mobile Crisis team (no CMHI funding, but service connections), and Parent Partners. In February, the following programs were reviewed: Youth Embrace Success (Children's Home Society), Community Resource Specialist (Vancouver Children's Therapy Center), and the Community Empowerment Project (Human Services Council). Information regarding the review of these programs is provided in the appendices.

- *Have barriers to development and implementation of the mandated services been identified and how are they being addressed?*
Barriers at this point in time are being identified around the issue of funding beyond the grant. The Resource Management Committee will be making recommendations to the Community of Care Advisory Council regarding possibilities for leveraging funds and identifying resources for continued funding of successful projects.

Appendices 2. Resource Management Committee Summary Report (January and February)

IV. System Level Coordination/Infrastructure and Management Structure:

- *Identify management team members, listing participants by name, agency or constituency being represented, and their role on the team. Identify any changes in the make-up of the team since the previous quarterly report.*
New members for the Community of Care Advisory Council (COCAC) were appointed to fill vacancies. Family members nominated Kristy White (previously elected, resigned, and able to return), and Jamie Stallings, a Head Start Parent Coordinator. These nominations were approved by the COCAC. Don Koenig, was elected as a community representative by the COCAC.

The January 2003 general meeting was attended by LouAnn Southern, Peer Mentor, who was attending the System of Care Community Meeting in Portland, Oregon. Discussions focused on updates on the Parent Partners Project, Youth in Transition Grant, and a proposal for developing the Department of Community Services into an Administrative Service Organization.

- *Include any new or additional public policy, including memoranda of understanding and or legislation, developed since the last report.*
COCAC Bylaws revisions were drafted and will be presented at the April General Meeting. Revisions are minor and will support the work continuing as planned.
- *List optional services (as suggested but not mandated, in the Guidance For Applicants) being provided and identify how these services are being funded, managed, and supervised?*
No changes since last report.
Projects include Juvenile Justice Connections jointly funded by the Juvenile Justice and the CMHI Grant, and Title IVE funded by DSHS and the RSN. The school proviso is funded by DSHS.

Youth House project is funded by the county general funds.

- *Describe linkages with universities, research projects, media, or other entities not directly involved in providing services to the target population.*
An important link with PSU and the evaluation process has been the hiring of a family member who has the title of Family Evaluator. Her role is unique in that she is expected to be the family voice on the evaluation team. She drives many of the questions and interprets information based on her own experiences. She also makes sure that the information presented is of interest to families and is presented in a family friendly manner.

- *Have barriers to any of the above listed activities been identified and if so, how are they being addressed?*
Communications regarding the projects and programs are high priorities. Communicating the successes of the SOC will move the project forward and create community support.

V. Cultural Competence:

- *Describe efforts being made for staff of the site to reflect the diversity of the site community and any staff changes since the last quarterly report due to these efforts.*
The Cultural Competency Committee completed Clinical Practice Standards for Cultural Competency. The standards are being forwarded to the RSN Quality Review Team to be used during the chart reviews.

Planning is underway for a community-wide training. Youth will be asked to participate in the training. Dawn Caldwell from the Minority Youth Leadership Program presented information about this youth-led program that meets weekly to engage all youth in leadership and community activities. An ongoing partnership with the youth is being developed so that youth voice can be a component of the Cultural Competency Committee.

Appendices 3: Clinical Practice Standards for Cultural Competency

VI. Family Involvement:

- *Describe how family members are involved in the implementation of the grant activities: i.e., service planning, data collection and dissemination, systems planning, budget development, informing policy makers about the services needed, and in policy development.*

Families continue to be involved in the designing and prioritizing of **the Community Empowerment Project**. The Citizen's Advisory Council for Community Empowerment membership is made up of families raising a child with complex needs. The creation and continued presence of the Community Empowerment Project has changed families in this community by reminding them that their experiences are valued.

The mission of the **Parent Partners Program** is: "Empowering parents by lending a helping hand. To promote self-sufficiency, strength, and hope through non-judgmental, compassionate support." Parent Partners are parents who use their personal experiences as caregivers of children with emotional/behavioral

challenges, listening, system navigation, and identification of community resources to help parents experiencing the same challenges. To date, 150 parents have been supported through this program. Forty-seven families are currently active, while 103 have “graduated.”

The **Family Action Committee** continues to receive updates from the Respite Sub-committee with a target of March for recommendations to the Community of Care Advisory Council. Refinement of the Exceptional Efforts Awards continues with the first awards to be presented at the April 2003 general meeting. A draft of chart for gathering and analyzing/reporting information has been developed with the goal of becoming fully functioning and demonstrating impact by June of 2003.

- *Have barriers been identified in family involvement and how are they being addressed?*
Communications barriers continue to be addressed through outreach efforts. These efforts include connections with Family Resource Centers and the identification of community newsletters in which family connections can be made.

Appendices 4: Development Steps for the COC Family Action Committee

VII. Social Marketing/Public Education Campaign:

- *Describe any changes to your social marketing/public education plan this quarter?*
A draft of an updated Social Marketing Plan was presented to the COCAC in January. The plan is comprehensive and will be used to move from the grant-funded project to a sustained effort to communicate with the community about empowering children and families in our community.
- *How has the national campaign team helped you this quarter.*
The plan was developed after reviewing the information gleaned from the Communications Academy (Vanguard) and other information gathered for the purposes of developing a strong marketing plan.
- *Who were your targeted key audiences and stakeholders this quarter? What were your key messages and how were they disseminated?*
Key audiences for the marketing plan were internal, while efforts to share information about the System of Care and free services and supports were presented to school district personnel, mental health providers, and community members.

This information was summarized in a Social Marketing Presentation prepared for the COSMOS visit, which took place on January 29th and 30th. A copy of this presentation and the draft for the marketing plan are included in the appendices. Central to this presentation was the use of

the Logic Model that was part of the written report received from COSMOS on a prior visit (2001). The presentation format was a direct response to the logic model, and was helpful in reviewing the marketing efforts to this point, and helping the committee to focus on efforts in the future.

The quarterly Community of Care Newsletter was distributed to about 400 families and professionals during January. Articles included: Information on Exceptional Efforts Awards, Portland State University Data, Community Empowerment Project, Parent Partner Program, Youth in Transition Grant, Respite Care, and an expression of thanks from a "Mom."

- *Have barriers to the implementation of the public social marketing/public education efforts been identified, and if so, how are they being addressed.*

Issues around the social marketing campaign that proved to be barriers include the lack of emphasis on marketing during the early years of the grant. While a video and brochure were produced in the third year of the grant, the outreach efforts were limited. Moving forward with a well defined plan earlier would have been beneficial to the Community of Care and System of Care efforts.

- *How has the national campaign team helped you this quarter.*
Information from Vanguard and the Children's Mental Health Campaign have been incorporated into the information and planning of the Social Marketing Committee.

**Appendices 5: Social Marketing Presentation (COSMOS visit
January 29, 30, 2003)
Community of Care Newsletter, January 2003**

VIII. Evaluation:

Clark County System of Care Evaluation Quarterly Report December 1, 2002 to February 28, 2003

The table below depicts the interviews completed during this three-month period, and the total interviews completed. Interviewing began in December 1999.

	December 2002 through February 2003	Cumulative total
Intake Descriptive Information Questionnaires	40	664
Number of children for whom baseline data collection is complete (youth and caregiver)	16	310
Number of children for whom 6-month follow-up data collection is complete	26	226
Number of children for whom 12-month follow-up data collection is complete	20	134
Number of children for whom 18-month follow-up data collection is complete	14	92
Number of children for whom 24-month follow-up data collection is complete	9	61
Number of children for whom 30-month follow-up data collection is complete	14	37
Number of children for whom 36-month follow-up data collection is complete	8	9

1. How are the positions for the national evaluation and any specific local evaluation being used to implement, interpret, and disseminate the evaluation data?

There is one full-time Family Information Specialist (interviewer) located at Columbia River Mental Health, one full-time FIS at the Department of Corrections—Juvenile Justice, one half-time Family Evaluator working with the evaluation team at PSU, and one full-time FIS with the Department of Community Services—Behavioral Health Services.

The FIS's continue to interview families throughout Clark County that have received mental health services through mental health providers, crisis intervention programs, or juvenile justice. The numbers of completed interviews are shown in the table above.

During this quarter, dissemination efforts were focused on local, state, and national audiences. Nationally, we presented information about Clark County at two conferences and submitted a book chapter. At the state level, we presented to the Children and Family Services Committee in the Washington State legislature. Locally, we completed a data report about changes in children's functioning over time, and we presented data to the Transitions steering committee.

2. *How are the results and data being disseminated, with whom, and how is it being used for policy development?*

- We presented a poster that detailed evaluation outcomes from the Connections project at two research conferences, the National System of Care Community Meeting held in Portland, and the Systems of Care: Expanding the Research Base conference held in Tampa.
- We completed and submitted a book chapter on involving families in evaluation which discusses our experiences in Clark County.
- We presented to the House Children and Family Services Committee of the Washington State Legislature.
- We presented to the Transitions steering committee twice using our data regarding youth of transition age.
- We prepared and published a data report about the changes in level of functioning for youth in our study.

Many of the reports and presentations are available on our website, www.rri.pdx.edu/ClarkCo.

3. *Have barriers to the implementation of the evaluation effort been identified and how are they being addressed?*

There have been no major barriers to the evaluation effort during this timeframe. As always, we continue to work on increasing retention rates, ensuring the consistency and accuracy of data, and securing new interviews.

IX. Technical Assistance and Trainings:

- *Describe training activities that have occurred for your community this quarter.*

Training continues to be provided by the Community Empowerment Project.

Community Empowerment Project Quarterly Report for Dec '02 to Feb '03

<i>Active Membership</i>		
As of Date	Member Type	# of members
2/28/03	Family Members (w/special needs kids)	202
	Parent Partners (employed by MH system)	36
	Community Members (other concerned citizens)	193
	Total Membership	431

Community Empowerment Project Continued

Trainings: December 2002 – February 2003		
Name & Date	# of attendees	Satisfaction Rate (%)
STS - Advocacy Training @ Clearview - Dec 2002	8	100.00%
Individualized & Tailored Care (ITC) Training - Dec 2002	6	91.43%
Parent Partner Monthly Meeting - Jan 2003	6	86.67%
Win/Win Communication Series - Training #1 - Jan 2003	30	95.65%
Parent Partner Monthly Meeting - Feb 2003	7	100.00%
Win/Win Communication Series - Training #2 - Feb 2003	25	98.48%
Core Parent Partner - Feb 2003	5	100.00%
Totals	87	97.68%

In addition, a training took place on January 13th, on transition practices for facilitating youth with serious emotional/behavioral difficulties. See brochure and evaluation results in appendices.

- *Future plans for training.*
The Community Empowerment Project has scheduled Cross Agency System Trainings in March and June of 2003, IEP Training in March, Breaking Deadlocks and Parent Effectiveness Leadership Training in April and May.

**Appendices 6: Brochure for Navigating Rough Waters workshop
Evaluation Results**

X. Sustainability

- *List percentages of your match funds which comes from public or private sources.*

\$839,869.28

100% Public Funds

XI. Lessons Learned

- *Please list lessons learned or accomplishments your community has experienced this quarter that you would like to share with others.*

The experiences over the second quarter of the fifth year have produced a sense of pride in accomplishments. The review of the Projects and Programs undertaken by the Resource Management Committee reflect System of Care values and principles being carried out at multiple levels of the community. The preparation work for the Social Marketing review by COSMOS helped members of the COCAC to reflect on work that has been productive in acquainting school personnel and service providers with the System of Care, and access to mental health and other services in the community. The work of the Parent Partners has begun to produce results for families and the work of the Community Partners committee is beginning to connect families looking for solutions to problems in a positive way. The Community of Care can begin to point with pride to accomplishments made possible through community collaboration and grant funds.